

Michigan Department of State - Dealer Selection for Designated Branch Offices

(Please complete all sections of this form)

Business Name		Dealer License No.
Business Street Address		City
Business Email Address		Date
Owner/Officer's Signature X	Owner/Officer's Printed Name	Title

List below up to a maximum 3 branch offices where you will submit dealer transactions.
Enter the branch designated to purchase BFS-4 15-day temporary registrations as your first choice.

1st Branch BFS-4 Temporary Registration Purchases	Branch Number	Branch Name	
	Street Address		City
2nd Branch	Branch Number	Branch Name	
	Street Address		City
3rd Branch	Branch Number	Branch Name	
	Street Address		City

Return to: Michigan Dept. of State, Business Licensing Section (**email as an attachment to licensing@michigan.gov**).
If you do not have access to email, please fax to 517-335-2810.

If you request to change an EFT branch, please contact Kate Lintner at LintnerK@michigan.gov or by phone at 517-373-1768
Completing this form does not modify EFT choices.